

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application)	<u>PATENT APPLICATION</u>
)	
Inventor: Hem P. Takiar)	
)	
Application No.: Unknown)	
)	
Filed: Herewith)	
)	
Title: PERIPHERAL CARD WITH HIDDEN TEST PINS)	<u>Customer No. 28554</u>
)	

POWER OF ATTORNEY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I hereby appoint DeNIRO, Kirk J. (Reg. No. 35,854), MAGEN, Burt (Reg. No. 37,175), MARCUS, Brian I. (Reg. No. 34,511), and VIERRA, Larry E. (Reg. No. 33,809), as our attorneys or agents to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please direct all telephone calls and correspondence for the above-identified application to:

Burt Magen, Esq.
Vierra Magen Marcus Harmon & DeNiro LLP
685 Market Street, Suite 540
San Francisco, California 94105
Telephone: 415.369.9660, Facsimile: 415.369.9665

SanDisk Corporation is the assignee of the entire right, title and interest in the above-identified patent application. I, the undersigned, declare that I have reviewed copies of the documentary evidence establishing chain of title to the patent application identified above from the inventors to the assignee which:

 X is filed for recordation herewith; or
 was recorded at Reel , Frame ; or
 has been sent for recordation under separate cover, a copy attached herewith.

The undersigned is authorized to sign this document on behalf of the assignee.

Signature: 

Date: July 15, 2003

Name: Charles VanOrden

Title: Vice President & General Counsel

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration
Submitted
with Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

SAND-01004US0

First Named Inventor

Takiar

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PERIPHERAL CARD WITH HIDDEN TEST PINS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

Burt Magen, Vierra Magen Marcus Harmon & DeNiro LLP

Name

685 Market Street, Suite 540

Address

City San Francisco

State California

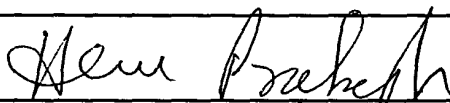
ZIP 94105

Country USA

Telephone 415.369.9660

Fax 415.369.9665

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name Hem P.
(first and middle [if any])Family Name Takiar
or SurnameInventor's
Signature

Date 7/14/03

Residence: City Sunnyvale

State California

Country USA

Citizenship USA

Mailing Address 1544 Blackfoot Drive

City Fremont

State California

ZIP 94539

Country USA

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name
(first and middle [if any])Family Name
or SurnameInventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.